

See discussions, stats, and author profiles for this publication at: <https://www.researchgate.net/publication/303899461>

TRADISYUNAL NGA PAMULONG: A Rationale on the Persistence of Faith Healing Practices in Miagao, Iloilo

Article · April 2016

CITATIONS

0

READS

31,790

1 author:



[Sean Clark Luinor Antallan Labastida](#)

University of the Philippines Visayas

1 PUBLICATION 0 CITATIONS

SEE PROFILE

TRADISYUNAL NGA PAMULONG:

A Rationale on the Persistence of Faith Healing Practices in Miagao, Iloilo

Labastida, Sean Clark Luinor A.

Alapay, Johnpolven

Billones, Jenny

Gonzales, Jackquilyn

Macuja, Yra

Manlapig, Ena Eloisa

Montevirgen, Maurice Joy

Pineda, Karla Joyce

Tirol, Fritzie Andrea

BA (Political Science) III

Augil Marie Q. Robles

Psych 108 Professor

April 29, 2016

I. INTRODUCTION

A. Background of the Study

Traditional healing is part of the Filipino culture that has been passed down through many generations, and is continuously being practiced, especially in far-flung barrios and barangays in the country. It has a rich history dating back in the precolonial period where *babaylan*, aside from being a religious leader, served as the main dispensers of health care to everyone in the community.

Although it had been subjected to several challenges, traditional healing practices survived the brutal repression under the Spanish colonizers, the introduction of foreign medical system and education during the American occupation, and the present predicaments brought about by globalization. In fact, these historical experiences have made possible the existence of diverse blends of the native and foreign healing arts, superstitions, beliefs and practices.

From *babaylan*, the traditional healers now operate under various names, such as the *albularyo*, *manghihilot*, *medico*, *mangluluop*, *magtatawas* and faith healers. They become instrumental in ensuring that their *kapwa* receives the health care he/she needs regardless of gender and social status. The traditional Filipino healing has been the alternative for the majority of the urban poor and people living geographically isolated and disadvantaged areas (GIDAs) in having their illnesses treated for not being able to afford the services of hospitals and health-care professionals. Instead of buying expensive synthetic medicines, they resort to herbal concoctions and prayer-based therapies as prescribed by these traditional healers.

Aside from its obvious function, the traditional healing practices also reflect the Filipino psyche that includes its culture, folklore religion, superstitions alongside saints and mythological creatures. Hence, it is important to study faith healing, a type of traditional healing, to further understand Filipino psychology.

B. Statement of the Problem

This study focused mainly on the rationale on the persistence of faith healing tradition. Specifically the researchers sought to answer this research question: “Why do faith healing practices continue to exist in the modern Miagao setting?”

The aim of the study is not to offer a conclusive generalization for the entire Philippines given that it is only conducted on Miagao, Iloilo. This research is qualitative in nature, mainly drawing from the narrative accounts of the respondents.

C. Significance of the Study

Through this study, the following objectives can be achieved: (a) examination of a case study of faith healing in the Municipality of Miagao, (b) understanding a faith healer's perspective on the source of her capabilities, (c) documenting the rationale of Filipinos for availing faith healing services, (d) inquiry on the incorporation of modern medical practices to traditional faith healing, and (e) identification of factors that contribute to the persistence of faith healing in a predominantly Catholic municipality.

Moreover, this study is significant to further understand Filipino Psychology, which is commonly defined as a "psychology born out of the experience, thought and orientation of the Filipinos".

II. REVIEW OF RELATED LITERATURE

A. Brief History of Filipino Traditional Medicine

Medical practices in the Philippines is rich with history. Its coverage extends from the precolonial period to the 300-year Spanish and 50-year American occupation of the country, and finally down to the establishment of the Republic of the Philippines (Aping, 2016).

As defined by Saydoven (2009), "Traditional medicine also known as indigenous health knowledge and practices include approaches, knowledge and beliefs incorporating plants, animal and /or mineral based medicines, spiritual therapies, manual techniques and exercises, applied singularly or in combination to maintain well-being, as well as treat, diagnose or prevent illness".

In the case of Filipino traditional medicine, it has been practiced for more than a thousand of years starting circa 8th century A.D as recorded in the annals of Asian travelers (Saydoven, 2009). It must be noted that traders from China, India, and Persia have been visiting the Philippine islands even before the Spanish colonization. As a result, the influences of the traditional Chinese medicine, Ayurvedic Indian medicine and Yunani-Tibb (Greek-Persian) Medicine can be traced in the Filipino traditional medicine (Saydoven, 2009, p.1).

Additionally, the Spanish chroniclers and friars were able to document accounts of indigenous healing practices in the archipelago. “Foremost among the Hispanic literature in the Philippines are the botanical descriptions of medicinal plants and trees and their uses by various types of traditional healers” (Saydoven, 2009 p. 1). However, the spread and eventual dominance of Catholicism repressed the practice of indigenous healing because they were considered as pagan and 'works of evil'. During the early colonial era, the indigenous practice of medicine was coupled with the traditional European medicine using natural substances (e.g, herbs and minerals). Modern medicine only formally entered the Philippines when the College of Medicine at UST was set up. Nonetheless, this education was only accessible to the Spaniards in the country and some mestizos

Universal access to education was later available during the American occupation. “North American medicine was inevitably introduced with the establishment of the Philippine Medical School, now the University of the Philippines College of Medicine” (Saydoven, 2009 p. 1). The native traditional medicine was put on the sidelines with the prevalence of foreign health and medical systems in the country. Nonetheless, it resulted to the assimilation of foreign medical practices, such as the use of synthetic medicines, in the traditional Filipino healing.

With the advent of globalization, the Filipino traditional medicine presently becomes subject to disintegration or improvement due to scientific medical practices and technologies.

B. Psycho-medical System

The study of faith healing is indeed an aspect of Philippine psychology's history. As a matter of fact, Philippine psychology revolves around four lines of filiation to which faith healing is included in one as identified by Salazar (1979). These four areas are the following: a) Academic-scientific psychology; b) Academic-philosophical psychology; c) Ethnic psychology; and d) Indigenous medico-religious practice and theory.

The Filipino ancestors had a psycho-medical system, which took religion as its basis and explanation. According to Salazar (1979), “From the religious-therapeutic ideas of the babaylan-katalonan to the faith healing arts of the present, one can perceive an historical connection through the messianic movements and the condemned or tolerated medico-religious practices during the Spanish period as well as through the culminating and highly acculturated spiritista, movement at the turn of the twentieth century” (p. 32-33). Therefore, this line of filiation started with the

diagnosis and treatment of diseases through the practices of babaylan-katalonan based on the idea of two souls.

Through the messianic movements, ancient medico-religious beliefs and skills were preserved among the rural folk during even if these were greatly denounced in the Spanish era. The birth of the spiritista movement during the revolutionary period is a complex phenomenon itself which involves the socio-cultural and emotional needs that the messianic movements answered to. “Faith healing as we know it today appears to derive at once from the survival of the millenarian spirit amongst the urban poor and the peasantry and from the more specifically spiritista strain” (Salazar, 1979, p. 33).

The psycho-medical system is most directly connected to faith healing. Thus, the fourth filiation could be clarified through comparing ancient psycho-religious therapy to the present one of faith healing. Salazar (1979) states that that katalonan-babaylan could and always attempt to heal illnesses which concern the relations of man and spirits, whereas the herbolarios cure only the ordinary ailments with the use of herbs. Contrary to the common notion, a “faith healer would tell you that there are diseases that can be healed (and should in fact be healed) by the medical doctor or by a good herbolario” (Salazar, 1979, p. 35). Nevertheless, those diseases which doctors can not heal, a faith healer can. Hence, a faith healer complements the modern medical practice.

Comparing the present faith healers with their ancient counterparts, the former can be regarded as the contemporary embodiment of ancient Filipinos’ medico-religious system of beliefs and practices. In sum, the study of psycho-medical system provides a better understanding of Filipino Psychology.

C. Healers and Specialists in the Philippines

Apostol and Baet (2007) described the different types of healers and specialists in the Philippines. Each of them has a function that distinguishes them from the rest. Nonetheless, most of these healers and specialist believe that their healing crafts are bestowed to them by God or other supernatural being. This explains why their healing practices involves prayers, incantations and other religious rituals.

One of these is the *albularyo* which are referred to as the “general practitioners” and the “primary dispensers of health care” (Apostol and Baet, 2007, p.2). They usually come from a family-line of healers, which consider healing as its vocation or calling. Their ability is commonly

attributed to a supernatural being, such as the Holy Spirit. Additionally, their healing prowess is developed through years of apprenticeship. There are differences in the healing practices of *albularyo* as a result of the archipelagic setup of the country.

Another is the *hilot*, who denotes to “both the midwife (*magpapaanak*) and the chiropractic practitioner (*manghihilot*)” (Apostol and Baet, 2007, p.5). On one hand, the *magpapaanak* assist the birthing process of mothers in rural areas. They have a basic knowledge on herbal plants, which they deemed as significant for prenatal and postnatal care. On the other hand, the *manghihilot* provide “chiropractic” manipulation and massage for the diagnosis of treatment of muscular ailments.

Third, the *medico* is the “pharmacist” of the traditional Filipinos. According to Apostol and Baet (2007), they are usually the *albularyos* who combined folkloric therapies with modern medicine (e.g. acupuncture, injection, prescription pharmaceuticals).

The fourth category is called as the “Diviners” composed of the *mangluluop*, *manghihila* and *mangtatawas*. The *mangluluop* is a specialist who diagnose an illness through a ritual of *luop*. “The ritual paraphernalia consists of the *kalanghuga* (a kind of freshwater or saltwater shell), salt (to weaken the supernatural spirits), *benditang palaspas* (piece of blessed palm leaves from Palm Sunday), charcoal made from a coconut shell, a coconut midrib and a tin plate” (Apostol and Baet, 2007, p.7). With a concoction of these materials in the tin plate, a diagnosis of the illness can be given based on the appearance of the *kalanghuga*. Next, the *manghihila* also uses various paraphernalia, especially coconut oil which is applied to the affected area. “If the strip of material sticks to the surface, resisting the pull, this area is assumed to be an area of affliction, usually a pulled muscle or sprain” (Apostol and Baet, 2007, p.7). A massage of the area will follow thereafter. The *mangtatawas* is best known for the use of *tawas* or alum for diagnosis.

Lastly, the *faith healers* belong to a separate category of specialization. They seem to practice most, if not all, of the specializations mentioned above. According to Aping (2016), they “come from either spiritist groups, diviners (a group that practice divination) or from persons who were previously saved from illnesses or death and had encountered epiphanies or mystical experiences who became convinced that they were destined to help sick people after receiving healing powers bestowed upon them by the Holy Spirit or other supernatural beings”. Thinking that their talent is God-given, some offer their services freely and receive voluntary contributions from their clients instead (Mercado, 1988). Others charge their patients for the sustenance of their

families. They usually associate illnesses to elves, evil spirits, sorcerers, etc. Consequently, faith healers resolve their diagnosis in different ways (Apostol and Baet, 2007). Aping (2016) enumerated six categories of faith healers: (a) psychic healers, who treat patients remotely; (b) whisperers of prayers, who utter prayers over the inflicted part; (c) prayer blowers, who blow prayers on affected areas; (d) anointers, who rub saliva over the aching area; (e) those who use crucifixes and icons and hovers it on the body of the patient, and (f) psychic surgeons, who perform "surgery" without the use of surgical tools.

III. METHODOLOGY

A. Respondents

There are three types of respondents in this study, namely, a seller of folk medicines, a faith healer and two clients.

For the vendor of various types of traditional medicines, Mrs. Flordeliza Dignaran was the respondent. She was purposively selected out of the three vendors, whose stalls are lined up in the Miagao Public Market. This is because her daughter, who was also present at the time of gathering data, was a church-mate of one of the researchers. Dignaran has been selling folk medicinal products for 40 years already, starting at the age of 19 when she inherited the business from her grandmother. It is her main source of livelihood.

For the faith healer, Mrs. Fe Nente, who is a 66-year old woman from Brgy. Putrido, Miagao was asked. She was purposively chosen because one the researchers have met her and knew that Nente was a faith healer prior to the conduct of the study. She started to engage in the profession when she was 25 years old. Until now, she still offers her services, making her a faith healer for a total of 41 years and counting. She can be described as someone who has the skills of an *albularyo* and a *hilot*.

Lastly, two women, who are in their late 30s and are from Brgy. Putrido, were asked regarding their thoughts and experiences from availing a faith healer's services. They were selected through a mini-convenience sampling. The researchers asked persons on the street whether they had gone to faith healers sometime in their lives. Those who answered positively were then questioned. One was a selling *halo-halo* at the time, and the other was having a

manicure. Both have sought the service of Nente, either for themselves or for their family members.

B. Procedure

The indigenous research method used in this study is *pagtatanong-tanong*. It literally means “asking questions”. According to Pe-Pua (1989), “The repetition of tanong (question) to tanong-tanong indicates apparent casualness when the inquirer is truly determined to get answers to his questions” (p. 149). It is commonly misinterpreted as an “informal interview” or “improvisation”. Moreover, Pe-Pua (1989) remarked that *pagtatanong-tanong* “highlights the importance of tapping culturally appropriate indigenous research methods without claiming exclusivity to it for the particular culture” (p. 150).

Three sets of *pagtatanong-tanong* were conducted based on the number of types of respondents. Before it was carried out, the researchers first introduced themselves, gave an overview of the research topic and asked the respondents permission to partake in the study.

The method was chosen because of the following characteristics enumerated by Pe-Pua (1989). First, it is participatory in nature. Listing of questions through an interview schedule were not carried out. To enable a more interactive and spontaneous exchange of information, the researchers only made a tentative outline of topics to be discussed. “The outline is revised and improved as the *pagtatanong-tanong* opens up a new and richer perspective, to which the informant has a major input” (Pe-Pua, 1989, p. 150). Hence, the researchers did not exercise monopoly in setting the direction of the discussion.

Second, the researchers and the informant are of equal status. During *pagtatanong-tanong*, role reversals were evident given that both the researchers and the respective informants can ask each other. This echoes the informality and cordial/friendly atmosphere brought about by the research method as compared to a formal interview, where a line is clearly drawn between the interviewer and interviewee. At one instance, the researchers asked about a certain aspect of faith healing. Unknowingly after that, the respondents asked the researchers where they are from and what course they are taking. The first two characteristics usually lengthen the duration of data gathering.

Third, it is appropriate and can be flexible in studying particular aspect of Philippine society, such as faith healing. Pe-Pua (1989) stated that *pagtatanong-tanong* enables the researchers to take into account the norms followed by the informant and thus conform to them. The researchers were mindful in formulating the questions so as not to upset or make the informants uncomfortable. Certain actions considered as interruptions in the course of a formal or structured interview are taken as part of the process of *pagtatanong-tanong*. Some of these were the following. The researchers served refreshments to the faith healer. Since the mode of data gathering is not formal, other people listened and aired out their thoughts or opinions in relation to the queries. During *pagtatanong-tanong*, the daughter of the vendor, the children of faith healer and the friends of the clients took part in conversation.

Lastly, *pagtatanong-tanong* is “integrated with other indigenous research methods” and is more effective when coupled with other methodologies (Pe-Pua, 1989, p. 152). It may have been that the researchers have coupled *pagtatanong-tanong* with *pakikipagkwentuhan* throughout the procedure so as to have a better understanding of the research topic.

IV. DISCUSSION

In providing the rationale on the persistence of faith healing in Miagao, three sets of *pagtatanong-tanong* were conducted (i.e. a vendor of traditional medicines, faith healer, clients of faith healers).

A. Vendor of Folk Medicines

Mrs. Flordeliza Dignaran is a seller of traditional medicine in the Miagao Public Market for 40 years already. She inherited the business from her grandmother and since then, it has become her main source of livelihood. Although the profit is small, she noted that her earnings are enough to keep her business active.

The products she sells are bought from Antique. Some of these folk medicine are the following: incense (for bad spirits), blue *tawas* for itchiness (the best seller), *lana*, *agimat na bala*, *ginsansoy*, and colored bracelets for children. Her customers range from common Filipinos to *babaylan* and *manghihilot*. She herself oftentimes perform *hilot* to people using the products she sells. She claimed that her products are effective, one of the reasons her customers kept on buying

them. Furthermore, she noted that the usage of traditional medicine is still widespread in the municipality.

B. Faith Healer's Background

Mrs. Fe Nente is a 66-year old faith healer and a native of Brgy. Putrido, Miagao, Iloilo. She was 25 years old when she started to treat her patients. Consistent with the assumption of Aping (2016), Nente believed that she acquired her ability when she was still young when she dreamt of her deceased grandmother who guided her on how to improve her ability. In her dreams, she described that there were letters up above the sky and that for every letter that she grasped her ability will improve. She recounted that she had seen many mythical creatures such as Cyclops, *agta*, *kapre*, *dwende*, black and white ladies. However, she remarked that she was not able to make use of her healing ability due to physical limitations as she was still a kid and very fragile.

Similar with the description of Apostol and Baet (2007), Nente's family was actually a generation of faith healers. Her deceased husband and her children share the same ability. As a matter of fact, it was her late husband, also a native of Miagao, who passed the healing ability to her before he died. She said that there was a tradition in faith healing where a faith healer should pass his/her ability to a successor because if not he/she will not be able to die. The process of passing the ability was usually done by killing a white pig as a sacrifice and it is facilitated by a so-called "*surano*" or *babaylan*.

Additionally, she said that her ability does not involve any black magic because, according to her, her power or ability was God-given or it was Jesus Christ himself who bestowed it upon her. In fact, her whole family is a devout Roman Catholic. But contradictory to what is stated by the respondent, she mentioned that she has a hard time reading the Bible or any religious material of other Christian denominations. She said that her so-called "friends" (mythical creatures) prohibits her from reading them. She also added that it was the same "friends" who helped her survive life threatening incidents, like falling down from a tree and vehicular accidents.

Nente admitted that she just practiced faith healing to help other people and not for the purpose of earning money or profit from it. Her customers voluntarily give any donation but they are not forced to pay a fixed amount for the services they receive. She noted that it is not her main source of livelihood for she relies mainly on the vegetables she grow in her garden.

As to the process of healing, she conducts *hilot* or massage and sometimes puts *lana* or oil (from coconut fruit). She also uses herbs like *albularyo* and even other folk medicines sold in the public market. She also whisper prayers on the affected part, to which she refused to let the researchers hear one. According to Nente, her patients are commonly those people who suffer from *pilay*, headache, *usog*, *buyag*, *ti-aw-tiaw*, and people who are possessed by a bad spirit. She recalled that she had once treated a 10-year old boy who was possessed by a *tikbalang*. Prior to seeking her service, the father of the boy admitted his child to the Miagao Health Unit and then to a hospital in Guimbal. Nonetheless, it was only after a shirt of the boy was brought to Nente and have been prayed over when the child regained his consciousness. She added that the doctors were in awe and could not explain why the child had effectively recovered.

Although she affirmed that she can heal, she commonly tell her patients to seek a professional doctor's service or go to the Miagao Health Unit right away, especially in serious cases like bone fracture. Moreover, she sometimes advised them to take over-the-counter drugs, such as medicinal tablets, to ease their pain. Hence, she recognizes the existence and effectivity of modern medicine. In addition, she emphasized that it is the belief to be cured that really heals the patients. For example, one of her patients was 6 months-bedridden but was able to arise because Nente infused a positive mindset on her.

C. Persons who availed a Faith Healer's Services

Two persons who have availed the services of a faith healer either for their own selves or for their loved ones were asked through *pagtatanong-tanong*.

When asked why they still resort to faith healers despite the presence of medical doctors, they reasoned out that the traditional healers are within closer proximity and that their healing capability is proven effective based on several accounts. They customarily seek a faith healer for common sicknesses, such as cough, fever and body pain. For both respondents, this tradition of consulting faith healers was passed unto them by their parents.

They stressed that the inexpensiveness of availing a faith healer's services is not the primary reason why they sought one but rather it is the effectiveness of their healing capabilities to cure sicknesses. It was also noted by them that the effectiveness of a faith healer's power is dependent and subjective upon the patient or client. It is a case-to-case basis as mentioned by the

mother of a child, who first sought the service of Nente but since her child showed no signs of recovery she looked for another faith healer in the municipality. However, the respondents told that they go to the barangay clinic or to the Miagao Health Unit in cases where the patient does not recuperate.

V. ANALYSIS

From the gathered information, it can be concluded that faith healing practices are still prevalent in the Municipality of Miagao. This is evident with the outcomes of *pagtatanong-tanong* with a vendor of folk medicines, a faith healer and persons who have availed the services of a traditional healer.

Faith healing has been commodified into traditional medicines being sold in the Miagao Public Market. As a matter of fact, there were three tables full of various folk medicinal products in the market. This only suggests that there is a considerable demand for such products in the municipality. Thus, it has become a source of income for some.

As for the faith healer, it validated the literature of Apostol and Baet (2007) that traditional healing is considered as a family vocation passed from generation to generation. It also confirmed the writing of Aping (2016) that most faith healers attribute their curing powers to a supernatural being, such as the Christian God. As a result, some faith healers offer their services not because of monetary gains but rather of the desire to help their *kapwa* using their God-given talent as backed by Mercado (1988).

The common reasons for availing the services of a faith healer were also brought to light in this study. It was found that those people living far from the center of the municipality are more likely to seek a traditional healer's services. This is because the faith healers are only within walking distance as compared to the health-professionals, who are situated a ride away from their barangay. This distance may have made possible the emergence and the perpetuation of the tradition of seeking indigenous healers, especially in far-flung areas. Another is that it is inexpensive since no payment is usually required for such services. It is also a norm that they only go to a faith healer for minor types of sicknesses.

VI. CONCLUSION

From the three sets of *pagtatanong-tanong* conducted, three common themes were found. First, faith healing is a practice that is born and maintained out of tradition. The business of selling folk medicinal products was inherited by the vendor-respondent. As for the vocation of faith healing, faith healers commonly come from a line of family-healers. The custom also of seeking a faith healer is passed and inculcated by parents to their children. This tradition is also backed by rich history of faith healing in the Philippines as elaborated by Saydoven (2009). It flourished during the precolonial era but was suppressed under the Spanish crown, overshadowed by modern American medical practices and is currently challenged by globalization. Nonetheless, the tradition of faith healing survived despite those unfavorable circumstances.

Second, the tradition of faith healing can also be seen as a manifestation of the marriage of Filipinos' pagan past and Christian present. It must be noted that all of the respondents are Roman Catholics yet they subscribed themselves to activities which may be classified as "pagan". Nonetheless, they do not see these acts as sacrilegious or violating the Christian virtues. With more than 333 years of Spanish occupation of the country, the indigenous Filipino culture and tradition were not completely repressed but rather blended with the Christian practices. For example, around big Catholic churches, like the one in Quiapo, several peddlers sell icons of Catholic saints along with indigenous medical products and materials, prayer books including different kinds of *orasyon* or esoteric prayers in it.

Lastly, faith healing tradition have kept up with the advent of modern medical practices. In terms of medicinal products, powdered herbs sold in the market already come in the form of capsules. As for traditional healing, the faith healer-respondent try to incorporate and also complement their process of treating patients with modern medical practices. This is consistent with the literature of Salazar (1979), where it is found that faith healers acknowledge those diseases which they cannot heal and therefore refer their patients to doctors. Aside from their herbal prescriptions, faith healers also advise the intake of medical tablets, such as Paracetamol to relieve headache. The clients-respondent also recognize the limitations of the curing power of faith healers, and hence seek medical professionals for grave illnesses.

In conclusion, faith healing practices continue to persist in Miagao. Despite being a predominantly Catholic municipality, traditional healing seemed to have been embedded in the society as made apparent by the selling of indigenous medical products in the public market, the existence of a faith healer and the enduring habit of consulting one. This case may give a glimpse and reflect the overall situation of the persistence of traditional healing practices in the Philippines.

Bibliography

- Aping, M. (2016). History of Medicine in the Philippines. Retrieved March 29, 2016 from <http://www.marvin-aping.com/index.php/en/history-of-healing>.
- Apostol, V.J. and Baet, P.A. (2007). Philippine Healing Arts. Batangas City: Ancient Publishing House.
- Mercado, L.M. (1988). Power and Spiritual Discipline among Philippine Folk Healers. *Melanesian Journal of Theology*, 4(2), pp. 51-63.
- Pe-Pua, R. (1989). Pagtatanong-Tanong: A Cross-Cultural Research Method. *International Journal of Intercultural Relations*, Vol. 13, pp. 147-163.
- Salazar, Z. (1979). Faith Healing in the Philippines: An Historical Perspective. Retrieved March 29, 2016 from <http://www.asj.upd.edu.ph/mediabox/archive/ASJ-181980/salazar.pdf>.
- Saydoven, A. (2009). Filipino Traditional Medicine. Retrieved March 29, 2016 from <http://www.scribd.com/doc/22046305/Filipino-Traditional-Medicine-report#scribd>.